

**New Hampshire Department of Safety
Division of Fire Standards and Training
& Emergency Medical Services**

Mailing address: NH FST&EMS
33 Hazen Drive
Concord, NH 03305
Phones: (Toll free) 800-371-4503
(Local) 603-223-4200
(Fax) 603-271-1091
Email: emslicensing@dos.nh.gov



Legal Name Change Request Form

NOTE: Information on this form will be entered into your profile to document your legal name change.

Section 1: DEMOGRAPHIC INFORMATION

ORIGINAL <i>Legal</i> Name		NEW <i>Legal</i> Name	
First:		First:	
M.I.:		M.I.:	
Last:		Last:	
Generation:		Generation:	
(Optional, Non-Legal) Preferred / Nick Name you like to be called:			
Sex: M / F / X	Date of birth (mm/dd/yyyy):	Last 4 digits of S.S. #:	
U.S. Citizen? Y N	If not a U.S. citizen, name country of birth:		
Home Mailing Address:	(Street / PO Box #)		
	Town / City	State	Zip
Email (Must be unique to YOU):			
Cell phone number:	Home phone number:	Work phone number:	

Section 2: LEGAL DOCUMENTATION

Legal documentation must be attached to this form to be processed

Type of Documentation:

Marriage License ☐ Divorce Decree ☐ Other ☐ Describe Other:

This form can be submitted in one of 2 ways:

Mail to: FST&EMS, EMS Licensing, 33 Hazen Drive, Concord, NH 03305

OR

Email to: emslicensing@dos.nh.gov include the application and supporting legal documents as clear PDF attachments to the email (do not put them in the body of the email)

Signature:

Date: